Carleton University
School of Linguistics and Language Studies

CERTIFICATE IN TEACHING ENGLISH AS A SECOND LANGUAGE (CTESL)

APPLICATION FORM (POST-DEGREE)

A. Identifying Information

Last Name	First Name	Preferred Name

Permanent Address

City	Province	Country	Postal Code

Telephone Number	E-mail Address	Date of Birth (MM/DD/YYYY)

Mailing Address (if different from permanent address)

City	Province	Country	Postal Code

First Language ☐ English ☐ French ☐ Other: _____	Country of Citizenship
Status in Canada ☐ Resident ☐ Visa ☐ Other: _____	Date of Entry to Canada

B. Education

From (MM/YYYY)	To (MM/YYYY)	University/College	Degree Program	Graduated? If yes, provide date

C. Confirmation

I hereby certify that all statements are correct and complete.

Signature _____   Date _____

Send the completed application form, statement of interest, official transcripts, English language proficiency score (if applicable) to: CTESL Program, School of Linguistics and Language Studies, 236 Paterson Hall, 1125 Colonel By Drive, Ottawa, Ontario, Canada, K1S 5B6, or by email to **SLALSUndergraduate@carleton.ca**.